



STATE OF TENNESSEE
DEPARTMENT OF HEALTH

**REQUEST FOR PROPOSALS # 34349-79215
AMENDMENT # 2
FOR PHARMACY SERVICES**

DATE: April 8, 2015

RFP # 34349-79215 IS AMENDED AS FOLLOWS:

This Amendment is to clarify a response to question #8 in Section 2. The State would like to clarify the difference between dispense fee and prescription fee. Please see the new response to this question in the highlighted text in Section 2, Question 8 below.

- 1. This RFP Schedule of Events updates and confirms scheduled RFP dates.** Any event, time, or date containing revised or new text is highlighted.

EVENT	TIME (central time zone)	DATE
1. RFP Issued		Confirmed
2. Disability Accommodation Request Deadline	2:00 p.m.	Confirmed
3. Pre-response Conference	10:00 a.m.	Confirmed
4. Notice of Intent to Respond Deadline	2:00 p.m.	Confirmed
5. Written "Questions & Comments" Deadline	2:00 p.m.	Confirmed
6. State Response to Written "Questions & Comments"		Confirmed
7. Response Deadline	2:00 p.m.	April 13, 2015
8. State Opening & Scoring of Cost Proposals	2:00 p.m.	April 14, 2015
9. Negotiations		April 14, 2015
10. State Completion of Technical Response Evaluations		April 17, 2015
11. State Notice of Intent to Award Released <u>and</u> RFP Files Opened for Public Inspection	2:00 p.m.	April 24, 2015
12. End of Open File Period		May 1, 2015
13. State sends contract to Contractor for signature		May 4, 2015
14. Contractor Signature Deadline	2:00 p.m.	May 7, 2015
15. Performance Bond Deadline	4:30 p.m.	May 8, 2015

2. State responses to questions and comments in the table below amend and clarify this RFP.

QUESTION / COMMENT	STATE RESPONSE
1 Do we have to sign and submit Attachment 2 (Attestation) with our response?	It is not a requirement of the RFP response; however, it is required that the vendor sign the attestation before the contract can effectively start.
2 Will prescriptions be written/filled for 30, 60, or 90 days?	In accordance with the Ryan White Part B Medical Director's guidance, Ryan White Providers are encouraged to write prescriptions for greater than 30 days (e.g. 60 or 90 Days) for suitable clients. A client's suitability for a greater than 30 day prescription will be determined by the medical provider and not deferred to the pharmacist.
3 Would you please clarify if item C.5 is indeed a question for the above referenced RFP?	Please see Number 3 on the next page.
4 This contract is only for the HDAP (uninsured) population, correct?	Yes, this is only for the uninsured population.
5 The RFP states the program manages 2,000 lives. However the attachment shows a high point of 1692 during January 2014. Is the program expecting to program to grow in size, or is the enrollment for 2014 representative of how many lives will be enrolled for 2015.	The program has experienced an average growth of 5% over the past five years.
6 Does the program anticipate enrolling additional lives in their IAP program from the HDAP population? If so, how many are anticipated to transition in CY 2015, 2016, 2017, 2018?	Yes, the program anticipates transitioning clients from HDAP to IAP. A total of 25 – 40% of clients is targeted for transition each year.
7 Who is the contracted Wholesaler?	Currently, the State of Tennessee has a contract with Morris & Dickson Co. LLC.
8 What is the current dispense fee being paid?	The State pays a per prescription fee of \$14.50 currently that is inclusive of a dispensing fee; therefore, the State does not know what proportion of this \$14.50 is the dispensing fee.
9 Given the contract is to be awarded outside of the HRSA posting period, is it anticipated that the pharmacies will post in July and start to fill in October? Has special consideration been granted by HRSA to post and activate outside of the quarterly periods?	The program expects the contractor to begin services on August 1, 2015. This RFP is being offered by the State of Tennessee, not HRSA. The program will report according to grant requirements.
10 We are wanting to offer a virtual inventory management system. Which would present challenges in accepting physical inventory from the current provider. Our question is, if a virtual inventory were to be considered by the State, could we work with the program and their	All answers should be submitted that address the requirements of the RFP.

QUESTION / COMMENT	STATE RESPONSE
wholesaler to return (and get credit issued for) the existing physical inventory on hand with the current vendor?	
11 Also the RFP states the awarded vendor must make no changes to the sample contract. However, also states small areas may be negotiated, could you clarify if there will be opportunities to engage the program during the contracting period on areas of the contract that may be vague, or not in alignment with the awarded vendor's processes?	Section 1.6.1. of the RFP states: Each prospective Respondent must carefully review this RFP, including but not limited to, attachments, the RFP Attachment 6.6., Pro Forma Contract, and any amendments, for questions, comments, defects, objections, or any other matter requiring clarification or correction (collectively called "questions and comments"). Once awarded, changes cannot be made to the Pro Forma Contract.
12 Storage fee + delivered fee + dispensed fee = per prescription cost?	Yes
13 How many clients are in the program?	As of March 20, 2015, there were 3,244 clients in the program.

3. **RFP Amendment Effective Date.** The revisions set forth herein shall be effective upon release. All other terms and conditions of this RFP not expressly amended herein shall remain in full force and effect.